



IOWA DEPARTMENT OF NATURAL RESOURCES  
AIR QUALITY BUREAU

Initial Notification for Compression Ignition Engines<sup>a</sup>

158  
253

REC'D

NESHAP for Reciprocating Internal Combustion Engines  
40 Code of Federal Regulations (CFR) 63.6580 – 63.6675 (Subpart ZZZZ)

SEP 02 2010

APCO

Facility Information

Name of Firm/Company:	Facility Name (if different):	Facility Number (if known):		
DEPT. OF VETERANS AFFAIRS MEDICAL CENTER, IOWA CITY	_____	52-01-018		
Equipment Location - Street:	City:	State:	Zip:	
601 HWY 6 WEST (138)	IOWA CITY	IA	52246	
Mailing Address (if different):	City:	State:	Zip:	
_____	_____	_____	_____	
Person to Contact:	Phone number:	Email (if available):		
MARTIN L. JONES	319-338-0581 EXT. 6801	martin.jones2@va.gov		

This facility is a (please choose one):

☐ Major source: potential or actual emissions greater than 10 tons of any single hazardous air pollutant (HAP) or 25 tons of a combination of HAP

☒ Area source: potential and actual emissions below major source levels

Identification of Standard

☒ Yes, this facility is subject to 40 CFR Part 63, Subpart ZZZZ, *National Emission Standards for Hazardous Air Pollutants for Reciprocating Internal Combustion Engines (RICE NESHAP)*:

<sup>a</sup> This is an example of the type of information that must be submitted to fulfill the Initial Notification requirement of 40 CFR 63, Subpart ZZZZ. You may submit the information in another form or format, or you may use this form.